

**FEE TRANSMITTAL FOR FY 2001****TOTAL AMOUNT OF PAYMENT (\$)** 800.00**Complete if Known:**

Application No. Unassigned  
 Filing Date December 28, 2000  
 First Named Inventor Xia Dai  
 Group Art Unit Unassigned  
 Examiner Name Unassigned  
 Attorney Docket No. 042390.P10232

JCS622 U.S. PTO

09/752049

**METHOD OF PAYMENT (check one)**

1. ☒ [ X ] The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666  
 Deposit Account Name \_\_\_\_\_

☐ [ ] Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ [ ] Applicant claims small entity status. See 37 CFR 1.27

2. ☒ [ X ] Payment Enclosed: ☒ [ X ] Check  
 \_\_\_\_\_ Credit Card  
 \_\_\_\_\_ Money Order  
 \_\_\_\_\_ Other

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Code	Fee (\$)	Code	Fee (\$)		
101	710	201	355	Utility application filing fee	710.00
106	320	206	160	Design application filing fee	_____
107	490	207	245	Plant filing fee	_____
108	710	208	355	Reissue filing fee	_____
114	150	214	75	Provisional application filing fee	_____

**SUBTOTAL (1)** \$ 710.00**2. EXTRA CLAIM FEES**

		Extra Claims		Fee from below		Fee Paid	
Total Claims	<u>25</u>	- 20** =	<u>5</u>	X	<u>18</u>	=	<u>90.00</u>
Independent Claims	<u>3</u>	- 3** =	<u>0</u>	X	_____	=	_____
Multiple Dependent					_____	=	_____

**\*\*Or number previously paid, if greater; For Reissues, see below.**

Large Entity		Small Entity		Fee Description
Code	Fee (\$)	Code	Fee (\$)	
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** \$ 90.00

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>		
105	130	205	65	Surcharge - late filing fee or oath	_____
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	_____
139	130	139	130	Non-English specification	_____
147	2,520	147	2,520	For filing a request for ex parte reexamination	_____
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	_____
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	_____
115	110	215	55	Extension for reply within first month	_____
116	390	216	195	Extension for reply within second month	_____
117	890	217	445	Extension for reply within third month	_____
118	1,390	218	695	Extension for reply within fourth month	_____
128	1,890	228	945	Extension for reply within fifth month	_____
119	310	219	155	Notice of Appeal	_____
120	310	220	155	Filing a brief in support of an appeal	_____
121	270	221	135	Request for oral hearing	_____
138	1,510	138	1,510	Petition to institute a public use proceeding	_____
140	110	240	55	Petition to revive - unavoidable	_____
141	1,240	241	620	Petition to revive - unintentional	_____
142	1,240	242	620	Utility issue fee (or reissue)	_____
143	440	243	220	Design issue fee	_____
144	600	244	300	Plant issue fee	_____
122	130	122	130	Petitions to the Commissioner	_____
123	130	123	130	Petitions related to provisional applications	_____
126	180	126	180	Submission of Information Disclosure Stmt	_____
581	40	581	40	Recording each patent assignment per property (times number of properties)	_____
146	710	246	355	For filing a submission after final rejection (see 37 CFR 1.129(a))	_____
149	710	249	355	For each additional invention to be examined (see 37 CFR 1.129(b))	_____
179	710	279	355	Request for Continued Examination (RCE)	_____
169	900	169	900	Request for expedited examination of a design application	_____

Other fee (specify) \_\_\_\_\_

Other fee (specify) \_\_\_\_\_

**SUBTOTAL (3) \$ 0**

\*Reduced by Basic Filing Fee Paid

**SUBMITTED BY:**Typed or Printed Name: John P. Ward

Signature: \_\_\_\_\_

Date: 12/28/00Reg. Number: 40,216Telephone Number: 408 720-8300**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.